

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORKJuan Hernandez

plaintiff

(In the space above enter the full name(s) of the plaintiff(s).)

-against-

The City  
Commissioner of New York City Corrections  
Deputy Commissioner New York City Comm.  
Warden of RNDGAdjudication Hearing Captain Petty #1626  
Captain Burke #589  
Grievance Officer Civillian (perilman)  
Grievance Officer OBOC  
Warden of OBOC

defendants

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

## COMPLAINT

under the  
Civil Rights Act, 42 U.S.C. § 1983  
(Prisoner Complaint)

1985, 1986

Jury Trial: ☒ Yes ☐ No  
(check one)RNDG 7th Amend USCA (Jury)  
Fed R Civ 30  
injunctive declaratory  
relief soughtindividual & official  
capacity

16CV6690

## I. Parties in this complaint:

None

- A. List your name, identification number, and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff

Name Juan HernandezID # 360-16-00104Current Institution RNDGAddress 11-11 Hazen STEast Elmhurst NY 11370

B.

List all defendants' names, positions, places of employment, and the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1

Name Commissioner of NYC Corr. Shield #   
Where Currently Employed 70-25 Astoria Blvd NYC Correction  
Address 70-25 Astoria Blvd  
East Elmhurst NY 11370

Defendant No. 2 Name Deputy Commissioner NYC Corr. Shield # \_\_\_\_\_  
 Where Currently Employed NYC Corr.  
 Address 70-25 Astoria Blvd  
East Elmhurst NY 11370

Defendant No. 3 Name Warden RNDC Shield # \_\_\_\_\_  
 Where Currently Employed 11-11 Hazen ST NYC Corrections  
 Address 11-11 Hazen ST East Elmhurst NY 11370

Defendant No. 4 Name Captain Petty #1626 Burke #589 Shield # #1626 #589  
 Where Currently Employed NYCD Corrections  
 Address 11-11 Hazen ST East Elmhurst NY 11370

Defendant No. 5 Name Grievance Civilian perilsman Shield # \_\_\_\_\_  
 Where Currently Employed RNDC NYC Corrections  
 Address 11-11 Hazen ST East Elmhurst NY 11370

II. Statement of Claim: State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. In what institution did the events giving rise to your claim(s) occur?  
Non RNDC

B. Where in the institution did the events giving rise to your claim(s) occur?  
No Dorm Area - Cell Block 6up North

C. What date and approximate time did the events giving rise to your claim(s) occur?  
June 25th 2016

PLEASE NOTE : HERNANDEZ IS IN WRIT COURT TO EXPUNGE TICKET

D. Facts: T/P/O/ Hernandez contends HE DID NOT PROVOKED  
 instigate a incident that led to alleged fighting  
 June 26th 2016 and had witnesses to such Hernandez in Sugar North  
 claims that somehow it was checked off that Hernandez waived  
 his appearance to Hearing Hernandez claims said statement  
 is also 10 days later Hernandez was sentenced to 60 days Box Time  
 Hernandez appealed to Warden RNDG Adjudication hearing Dept.  
 Captain Burke Grievance RNDG, grievance RNDG to no avail.  
 Without just cause of procedural due process hearing Hernandez  
 was sentenced Hernandez claims he also suffered injury due to  
 attack on his person. Bruises and swelling to face chest back  
 pain soreness in shoulders and trouble eating due to jaw  
 and face pain. although no medical attention adequate  
 was provided

What happened to you?

Who did what?

Was anyone else involved?

Who else saw what happened?

### III. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received. pain and suffering, trauma, mental anguish, claustrophobia, anxiety, depression inadequate medical

### IV. Exhaustion of Administrative Remedies:

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted." Administrative remedies are also known as grievance procedures.

A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

Yes ☒ No ☐

If YES, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s). RNDC

B. Does the jail, prison or other correctional facility where your claim(s) arose have a grievance procedure?

Yes / No      Do Not Know     

C. Does the grievance procedure at the jail, prison or other correctional facility where your claim(s) arose cover some or all of your claim(s)?

Yes / No / Do Not Know     

If YES, which claim(s)? They claim they cannot interfere with disciplinary

D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose?

Yes / No     

If NO, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

Yes      No     

E. If you did file a grievance, about the events described in this complaint, where did you file the grievance? OBCC where box is located

1. Which claim(s) in this complaint did you grieve? Hernandez did not waive hearing  
the acceptance of my person to box

2. What was the result, if any? nothing

3. What steps, if any, did you take to appeal that decision? Describe all efforts to appeal to the highest level of the grievance process. grievance does not accept

F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here: n/a

2. If you did not file a grievance but informed any officials of your claim, state who you informed,

when and how, and their response, if any:

n/a

G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.

n/a

**Note:** You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.

V. Relief:

State what you want the Court to do for you (including the amount of monetary compensation, if any, that you are seeking and the basis for such amount).

IN official & individual capacities  
~~institute civil litigation to the sum of 12,000,000 dollars~~  
~~under 1st 4th, 5th, 8th, 14 th federal Cons. Jurisdiction Art 1 sec 1~~  
~~NYSC for failure to properly trian officers~~  
~~Denial of procedural Due Process Instituting a policy that is~~  
~~blind to inmates rights during hearing disciplinary Grievance~~  
~~obviously fails to intervene or protect once alerted Conspiracy~~  
~~to violate due process intentional infliction emotional distress~~  
~~Failure to allow witnesses to hearing or plaintiff FAILURE to~~  
~~properly investigate failure to punish captain once alerted to~~  
~~wrong Hernandez also seeks Feds. to declare said acts as~~  
~~unconstitutrional and to bar such further acts~~

VI. Previous lawsuits:

A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

Yes \_\_\_ No X

On  
these  
claims

If your answer to A is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another sheet of paper, using the same format.)

1. Parties to the previous lawsuit: n/a  
Plaintiff \_\_\_\_\_  
Defendants n/a
2. Court (if federal court, name the district; if state court, name the county) n/a  
n/a
3. Docket or Index number \_\_\_\_\_
4. Name of Judge assigned to your case n/a
5. Approximate date of filing lawsuit n/a
6. Is the case still pending? Yes \_\_\_\_\_ No \_\_\_\_\_  
If NO, give the approximate date of disposition \_\_\_\_\_
7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) \_\_\_\_\_  
n/a

Have you filed other lawsuits in state or federal court otherwise relating to your imprisonment?  
Yes \_\_\_\_\_ No 7

D. If your answer to C is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same format.)

1. Parties to the previous lawsuit:  
Plaintiff n/a  
Defendants n/a
2. Court (if federal court, name the district; if state court, name the county) \_\_\_\_\_
3. Docketor Index number n/a
4. Name of Judge assigned to your case \_\_\_\_\_
5. Approximate date of filing lawsuit \_\_\_\_\_
6. Is the case still pending? Yes \_\_\_\_\_ No \_\_\_\_\_  
If NO, give the approximate date of disposition \_\_\_\_\_
7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) \_\_\_\_\_  
n/a

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 8 day of 13, 2016

Signature of Plaintiff

Inmate Number

Institution Address

Juan Hernandez  
RNDC  
11-11 Hazen Street  
Elmhurst New York 11370

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint and provide their inmate numbers and addresses.

I declare under penalty of perjury that on this 8 day of 13, 2016 I am delivering this complaint to prison authorities to be mailed to the Pro Se Office of the United States District Court for the Southern District of New York.

Signature of Plaintiff:

Juan Hernandez

SWORN TO BEFORE ME

13<sup>th</sup> day of August 2016

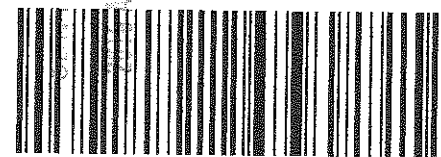
NOTARY PUBLIC

DANIELLE STRINGER  
Notary Public State of New York  
No 01ST6131234  
Qualified in Queens County  
Commission Expires August 1, 2017

Joan Hernandez 3601600104  
11-11 Hazen Street,  
Elmhurst, New York - 11370

C-74

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE  
**CERTIFIED MAIL**



7016 0910 0001 9294 6603

Legal Mail

USM  
SDNY

UNITED STATES POSTAGE  
PITNEY BOWES  
02 1P \$ 006.680  
0001806967 AUG 17 2016  
MAILED FROM ZIP CODE 11355

Rose

To: United States District Court  
Southern District of New York  
500 Pearl Street  
New York NY 10007

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